

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NEW YORK

Case number (if known)

Chapter 11

Check if this an amended filing

## Official Form 201

# Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>Montauk Transit Service LLC</u>		
2. All other names debtor used in the last 8 years	<p>Include any assumed names, trade names and <i>doing business as</i> names</p> <hr/>		
3. Debtor's federal Employer Identification Number (EIN)	<u>45-3526728</u>		
4. Debtor's address	<b>Principal place of business</b>	<b>Mailing address, if different from principal place of business</b>	
	<u>3601 Horseblock Road Medford, NY 11763</u>	<u>P.O. Box, Number, Street, City, State &amp; ZIP Code</u>	
	<u>Suffolk</u> <u>County</u>	<b>Location of principal assets, if different from principal place of business</b>	
		<u>Number, Street, City, State &amp; ZIP Code</u>	
5. Debtor's website (URL)			
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____		

Debtor **Montauk Transit Service LLC**  
Name \_\_\_\_\_

Case number (*if known*) \_\_\_\_\_**7. Describe debtor's business** A. *Check one:*

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))

- None of the above

B. *Check all that apply*

- Tax-exempt entity (as described in 26 U.S.C. §501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.**4854****8. Under which chapter of the Bankruptcy Code is the debtor filing?***Check one:*

- Chapter 7
- Chapter 9

 Chapter 11. *Check all that apply:*

- Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- A plan is being filed with this petition.
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to *Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

- Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?** No. Yes.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?** No Yes.

List all cases. If more than 1, attach a separate list

Debtor _____	See Attachment	Relationship _____
District _____	When _____	Case number, if known _____

Debtor **Montauk Transit Service LLC**  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**11. Why is the case filed in this district?** Check all that apply:

- Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?** No Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention? (Check all that apply.)**

- It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? \_\_\_\_\_

- It needs to be physically secured or protected from the weather.

- It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

 Other \_\_\_\_\_**Where is the property?**

Number, Street, City, State &amp; ZIP Code \_\_\_\_\_

**Is the property insured?** No Yes. Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

**Statistical and administrative information****13. Debtor's estimation of available funds**

## Check one:

 Funds will be available for distribution to unsecured creditors. After any administrative expenses are paid, no funds will be available to unsecured creditors.**14. Estimated number of creditors** 1-49 1,000-5,000 25,001-50,000 50-99 5001-10,000 50,001-100,000 100-199 10,001-25,000 More than 100,000 200-999**15. Estimated Assets** \$0 - \$50,000 \$1,000,001 - \$10 million \$500,000,001 - \$1 billion \$50,001 - \$100,000 \$10,000,001 - \$50 million \$1,000,000,001 - \$10 billion \$100,001 - \$500,000 \$50,000,001 - \$100 million \$10,000,000,001 - \$50 billion \$500,001 - \$1 million \$100,000,001 - \$500 million More than \$50 billion**16. Estimated Liabilities** \$0 - \$50,000 \$1,000,001 - \$10 million \$500,000,001 - \$1 billion \$50,001 - \$100,000 \$10,000,001 - \$50 million \$1,000,000,001 - \$10 billion \$100,001 - \$500,000 \$50,000,001 - \$100 million \$10,000,000,001 - \$50 billion \$500,001 - \$1 million \$100,000,001 - \$500 million More than \$50 billion

Debtor

**Montauk Transit Service LLC**

Name

Case number (if known) \_\_\_\_\_

**Request for Relief, Declaration, and Signatures**

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

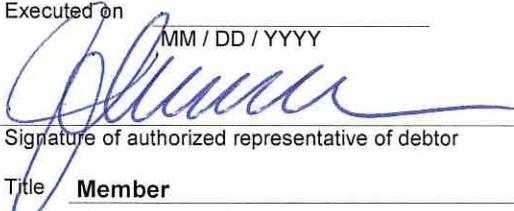
I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

MM / DD / YYYY



Signature of authorized representative of debtor

**John Mensch**

Printed name

Title **Member**



Signature of attorney for debtor

Date

MM / DD / YYYY

**18. Signature of attorney**

**Marc A. Pergament**

Printed name

**Weinberg, Gross & Pergament LLP**

Firm name

**400 Garden City Plaza**

**Suite 403**

**Garden City, NY 11530**

Number, Street, City, State & ZIP Code

Contact phone **(516) 877-2424**

Email address \_\_\_\_\_

**NY**

Bar number and State

Debtor Montauk Transit Service LLC  
Name \_\_\_\_\_

Case number (*if known*) \_\_\_\_\_

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NEW YORK

Case number (*if known*) \_\_\_\_\_ Chapter 11

Check if this an  
amended filing

### FORM 201. VOLUNTARY PETITION

#### Pending Bankruptcy Cases Attachment

Debtor	<u>East End Bus Lines, Inc.</u>	Relationship to you	_____
District	When _____	Case number, if known	_____
Debtor	<u>Montauk Student Transport LLC</u>	Relationship to you	_____
District	When _____	Case number, if known	_____

**United States Bankruptcy Court  
Eastern District of New York**

In re **Montauk Transit Service LLC**

Debtor(s)

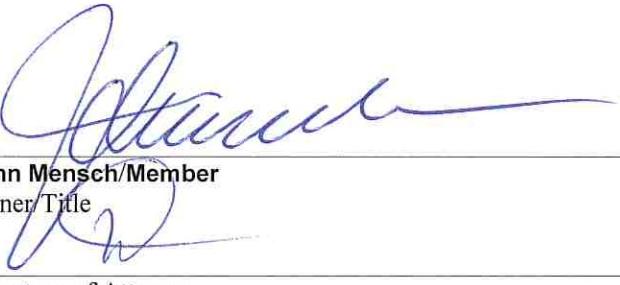
Case No.

Chapter **11**

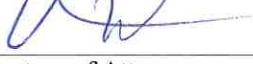
**VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: \_\_\_\_\_

  
**John Mensch/Member**  
Signer/Title

Date: \_\_\_\_\_

  
Signature of Attorney  
**Marc A. Pergament**  
Weinberg, Gross & Pergament LLP  
400 Garden City Plaza  
Suite 403  
Garden City, NY 11530  
(516) 877-2424 Fax: (516) 877-2460

Advantage Funding  
15450 South Outer Forty Drive, Suite 22  
Chesterfield, MO 63017

Ascentis Corporation  
11040 Main Street, Suite 101  
Bellevue, WA 98004

Bridgehampton National Bank  
194 Mill Road  
Westhampton Beach, NY 11978

Call-A-Head  
304 Crossbay Blvd.  
Broad Channel, NY 11693

Chiesa Shahinian & Giantomasi PC  
11 Times Square, 31st Floor  
New York, NY 10036

Commercial Credit Group  
169 Commack Road, Suite 236  
Commack, NY 11725

DeLage Landen  
1111 Old Eagle School Road  
Wayne, PA 19087

East End Bus Lines, Inc.  
3601 Horseblock Road  
Medford, NY 11763

East End Bus Lines, Inc.  
3601 Horseblock Road  
Medford, NY 11763

Flushing Automotive Financial Services  
135 Haven Avenue  
Port Washington, NY 11050

Internal Revenue Service  
Special Procedures  
2 Metrotech Center  
100 Myrtle Avenue  
Brooklyn, NY 11201

Internal Revenue Service  
P.O. Box 7349  
Philadelphia, PA 19101-7346

Montauk Student Transport LLC  
3601 Horseblock Road  
Medford, NY 11763

NYS Dept. of Taxation and Finance  
Bankruptcy Unit Special Procedure  
P.O. Box 5300  
Albany, NY 12205-0300

State of New Jersey  
Division of Employer Accounts  
P.O. Box 059  
Trenton, NJ 08646-0059

State of New York  
Office of Attorney General  
120 Broadway  
New York, NY 10271

Trans Ed  
24 Beckwoth Avenue  
Paterson, NJ 07503

United States Attorney  
Chief of Civil Division  
271 Cadman Plaza  
Brooklyn, NY 11201

United States Attorney's Office  
Eastern District of New York  
610 Federal Plaza, 5th Floor  
Attn: Long Island Bankruptcy Processing  
Central Islip, NY 11722-4454

US Dept. of Justice, Tax Division  
Box 55  
Ben Franklin Station  
Washington, DC 20044

Wells Fargo  
Bankruptcy Dept. MAC-X7801-014  
3476 Stateview Blvd.  
Fort Mill, SC 29715

Wells Fargo Financial Services  
123 S Broad Street, 9th Floor  
Philadelphia, PA 19109

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK

-----X

In Re: Chapter 11

Montauk Transit Service LLC, Case No.

Debtor. CORPORATE RESOLUTION

-----X

The undersigned, the Member Manager of Montauk Transit Service LLC, a corporation existing under the laws of the State of New York does hereby certify that a duly called meeting of the directors of Montauk Transit Service LLC, the following resolutions were adopted, and have not been modified or rescinded, and are still in full force and effect:

"Resolved, that in the judgment of the shareholders and directors, it is desirable and in the best interest of the corporation, that John Mensch, Member Manager of the Corporation, be empowered to cause a petition under Chapter 11 of the Bankruptcy Code to be filed by the corporation upon such date, and in the event, in his discretion, such action should be necessary for the protection of the corporation and preservation of its assets without further notice to the directors of Montauk Transit Service LLC, and it is further

Resolved, that John Mensch be and hereby is, authorized to execute and file all petitions, schedules, lists and other papers and to take any and all action which he may deem necessary and proper in connection with such proceedings under Chapter 11, and in that connection, to retain and employ Weinberg, Gross & Pergament LLP and to retain and employ all other professionals which they may deem necessary or proper with a view towards a successful conclusion of such a reorganization case."

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 13th day of September 2018.

  
John Mensch, Member Manager

Fill in this information to identify the case:

Debtor name	<u>Montauk Transit Service LLC</u>
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF NEW YORK</u>
Case number (if known)	_____

Check if this is an amended filing

## Official Form 206D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

**2.1 Advantage Funding**

Creditor's Name

**15450 South Outer Forty  
Drive, Suite 22  
Chesterfield, MO 63017**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number  
**9515,1611**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Buses

*Column A*

Amount of claim

Do not deduct the value of collateral.

**\$76,567.27**

*Column B*

Value of collateral that supports this claim

**\$90,000.00**

Describe the lien

**DMV**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

**2.2 Commercial Credit Group**

Creditor's Name

**169 Commack Road, Suite  
236  
Commack, NY 11725**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**2001,1504,1505,1503**

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

Buses

**\$1,138,783.92**

**\$1,000,000.00**

Describe the lien

**DMV**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Debtor	<b>Montauk Transit Service LLC</b>	Case number (if known)
Name		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
<b>2.3 DeLage Landen</b>		Describe debtor's property that is subject to a lien
Creditor's Name <b>1111 Old Eagle School Road Wayne, PA 19087</b>		\$256,683.77      \$150,000.00
Creditor's mailing address		
Creditor's email address, if known		
Date debt was incurred		
Last 4 digits of account number		
<b>2527</b>		
Do multiple creditors have an interest in the same property?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.		
		As of the petition filing date, the claim is:
		Check all that apply
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
<b>2.4 Flushing Automotive Financial Services</b>		Describe debtor's property that is subject to a lien
Creditor's Name		\$318,560.34      \$0.00
Creditor's mailing address		
Creditor's email address, if known		
Date debt was incurred		
<b>2017</b>		
Last 4 digits of account number		
<b>Auk4,K4nJ</b>		
Do multiple creditors have an interest in the same property?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.		
		As of the petition filing date, the claim is:
		Check all that apply
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
<b>2.5 Trans Ed</b>		Describe debtor's property that is subject to a lien
Creditor's Name		\$534,899.25      \$250,000.00
Creditor's mailing address		
Creditor's email address		
Describe the lien		
<b>DMV</b>		
Is the creditor an insider or related party?		
<input checked="" type="checkbox"/> No		

Debtor	<b>Montauk Transit Service LLC</b>	Case number (if known)
Name		
Creditor's email address, if known		<input type="checkbox"/> Yes Is anyone else liable on this claim?
Date debt was incurred		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)
Last 4 digits of account number		
Do multiple creditors have an interest in the same property?		As of the petition filing date, the claim is: Check all that apply
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed

2.6	<b>Wells Fargo Financial Services</b>	Describe debtor's property that is subject to a lien	\$257,169.65	\$450,000.00
Creditor's Name <b>123 S Broad Street, 9th Floor Philadelphia, PA 19109</b>		Buses		
Creditor's mailing address		Describe the lien		
		<b>DMV</b>		
Creditor's email address, if known		Is the creditor an insider or related party?		
Date debt was incurred		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Last 4 digits of account number <b>1700,1701</b>		Is anyone else liable on this claim?		
Do multiple creditors have an interest in the same property?		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.		
		As of the petition filing date, the claim is: Check all that apply		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$2,582,664.20**

#### Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you

enter the related creditor?

Last 4 digits of account number for this entity

**Chiesa Shahinian & Giantomaso PC**  
11 Times Square, 31st Floor  
New York, NY 10036

Line 2.6

**Wells Fargo**  
Bankruptcy Dept. MAC-X7801-014  
3476 Stateview Blvd.  
Fort Mill, SC 29715

Line 2.6

**Fill in this information to identify the case:**

Debtor name Montauk Transit Service LLC

United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

## Official Form 206E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

#### Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No, Go to Part 2.

Yes, Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address  <b>Internal Revenue Service  Special Procedures  2 Metrotech Center  100 Myrtle Avenue  Brooklyn, NY 11201</b></p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$109,740.86      \$109,740.86
2.2	<p>Priority creditor's name and mailing address  <b>NYS Dept. of Taxation and Finance  Bankruptcy Unit Special  Procedure  P.O. Box 5300  Albany, NY 12205-0300</b></p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$10,000.00      \$10,000.00

#### Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Debtor	<b>Montauk Transit Service LLC</b>	Case number (if known)
Name		
3.1	Nonpriority creditor's name and mailing address <b>Ascentis Corporation</b> 11040 Main Street, Suite 101 Bellevue, WA 98004	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address <b>Bridgehampton National Bank</b> 194 Mill Road Westhampton Beach, NY 11978	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address <b>Call-A-Head</b> 304 Crossbay Blvd. Broad Channel, NY 11693	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>KTRT</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address <b>State of New Jersey</b> Division of Employer Accounts P.O. Box 059 Trenton, NJ 08646-0059	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>6728</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Internal Revenue Service</b> P.O. Box 7349 Philadelphia, PA 19101-7346	Line <u>2.1</u>	<input type="checkbox"/> Not listed. Explain _____
4.2	<b>State of New York</b> Office of Attorney General 120 Broadway New York, NY 10271	Line <u>2.2</u>	<input type="checkbox"/> Not listed. Explain _____
4.3	<b>United States Attorney</b> Chief of Civil Division 271 Cadman Plaza Brooklyn, NY 11201	Line <u>2.1</u>	<input type="checkbox"/> Not listed. Explain _____
4.4	<b>United States Attorney's Office</b> Eastern District of New York 610 Federal Plaza, 5th Floor Attn: Long Island Bankruptcy Processing Central Islip, NY 11722-4454	Line <u>2.1</u>	<input type="checkbox"/> Not listed. Explain _____

Debtor Name	<b>Montauk Transit Service LLC</b>	Case number (if known)
<b>Name and mailing address</b>		<b>On which line in Part 1 or Part 2 is the related creditor (if any) listed?</b>
4.5	US Dept. of Justice, Tax Division Box 55 Ben Franklin Station Washington, DC 20044	Line <u>2.1</u>
		<input type="checkbox"/> Not listed. Explain _____

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1  
 5b. Total claims from Part 2

5c. Total of Parts 1 and 2  
 Lines 5a + 5b = 5c.

Total of claim amounts		
5a.	\$	<b>119,740.86</b>
5b.	+	\$ <b>4,054,125.35</b>
5c.	\$	<b>4,173,866.21</b>

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK

-----X

In Re: Chapter 11

Montauk Transit Service LLC, Case No.

Debtor.

Affirmation Under Local  
Bankruptcy Rule 1007-4

-----X

John Mensch, duly affirms under the penalties of perjury as follows:

1. I am the Member Manager of Montauk Transit Service LLC, the above-named debtor (hereinafter "Debtor"). I submit this affirmation in accordance with Local Bankruptcy Rule 1007-3 and in connection with the Debtor's voluntary petition for relief under Chapter 11 of Title 11 of the United States Code (the "Bankruptcy Code") filed herein.

2. The principal office of the Debtor is located in this district at 3601 Horseblock Road, Medford, New York.

3. The Debtor's taxpayer identification number is 45-3526728.

4. There is neither a case under the former Bankruptcy Act nor under the Bankruptcy Code currently pending by or against the Debtor.

5. No official or unofficial committee of creditors of the Debtor has been organized as of this date.

6. No property of the Debtor is in the possession or custody of any custodian, public officer, receiver, trustee, assignee of rents, or secured creditor or agent for any such persons.

7. The Debtor's principal books and records are located at 3601 Horseblock Road, Medford, New York.

8. A listing of the Debtor's twenty (20) largest unsecured creditors, excluding insiders, is attached to the Debtor's petition.

9. During the pendency of these proceedings, the Debtor intends to continue its operations in transportation.

10. The Debtor operates its business from 3601 Horseblock Road, Medford, New York.

11. It is anticipated that the Debtor's operations in the next thirty (30) days will result in a small profit.

12. No stocks, bonds, debentures, or other securities of the Debtor have been publicly issued.

13. The Debtor does not have any assets located outside the territorial limits of the United States.

14. It is desirable for the Debtor to continue its operations, as the Debtor believes itself to be capable of effectuating a reorganization.

Dated: Garden City, New York  
September 13, 2018



A handwritten signature in blue ink, appearing to read "John Mensch", is written over a horizontal line. The signature is fluid and cursive.